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PTO/SB/82 (10-00)

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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	08/894,211
Filing Date	July 30, 1977
First Named Inventor	Mordechai
Group Art Unit	3626
Examiner Name	Anthony Knight
Attorney Docket Number	0878

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

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<input checked="" type="checkbox"/> Firm or Individual Name	Mordechai Hammer				
Address	P.O.Box 6749				
Address					
City	Ramat-Gan				
Country	ISRAEL	State	ISRAEL	zip	52167
Telephone	972-51-693244, 972-3-5748867	Fax	972-3-5748867		

I am the: Email: Pat2pct@hotmail.com

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Mordechai Hammer	MAR 14 2003
Signature	Mordechai Hammer	GROUP 3600
Date	Mar 12, 2003	

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**REVOCATION OF POWER OF
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AUTHORIZATION OF AGENT**

Application Number	PCT/US96/1209
Filing Date	Jan 31, 1996
First Named Inventor	Mordechai
Group Art Unit	
Examiner Name	Anthony Knight
Attorney Docket Number	0758

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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Mordechai Hammer
Signature	<i>Mordechai Hammer</i>
Date	Mar 12, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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